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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	=	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Ted First name	Ashlee First name  M. Middle name
	Bring your picture identification to your meeting with the trustee.	Michalopoulos Last name and Suffix (Sr., Jr., II, III)	Michalopoulos  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		Ashlee M. Malley
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0622	xxx-xx-4625

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Debtor 1 **Ted Michalopoulos**Debtor 2 **Ashlee M. Michalopoulos** 

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	3032 Hopkins Street	If Debtor 2 lives at a different address:
		Steger, IL 60475  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	<ul> <li>Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> </ul>
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 2 Ashlee M. Michalopoulos Case number (if known) Tell the Court About Your Bankruptcy Case Part 2: The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details How you will pay the fee about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. When Case number District District When Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you District When Case number, if known Relationship to you Debtor When Case number, if known District 11. Do you rent your Go to line 12. No. residence? ☐ Yes. Has your landlord obtained an eviction judgment against you? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

**Ted Michalopoulos** 

Debtor 1

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	otor 1 <b>Ted Michalopoulo</b> otor 2 <b>Ashlee M. Michalo</b>		2000	Case number (if known)	
Par	Report About Any Bu	sinesses `	You Own as a Sole Proprie	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.		
		☐ Yes.	Name and location of bu	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	ate & ZIP Code	
	it to this petition.		Check the appropriate be	ox to describe your business:	
			☐ Health Care Busi	ness (as defined in 11 U.S.C. § 101(27A))	
			☐ Single Asset Rea	I Estate (as defined in 11 U.S.C. § 101(51B))	
			☐ Stockbroker (as o	defined in 11 U.S.C. § 101(53A))	
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))	
			☐ None of the above	e	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate ines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of tions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure U.S.C. 1116(1)(B).		
	For a definition of small	■ No.	I am not filing under Cha	pter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	Have Any	Hazardous Property or Ar	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat	☐ Yes.			
	of imminent and	<b>—</b> 100.	What is the hazard?		
	identifiable hazard to public health or safety?				
	Or do you own any		If immediate attention is		
	property that needs immediate attention?		needed, why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number, Street, City, State & Zip Code	

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Debtor 1 Ted Michalopoulos
Debtor 2 Ashlee M. Michalopoulos
Case number (if known)

Part 5: Explai

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	otor 1 otor 2	Ted Michalopoulo Ashlee M. Michalo		Document	Case n	number (if known)	
Par	t 6:	Answer These Questi	ons for Re	eporting Purposes			
16.		t kind of debts do have?	16a.	Are your debts primarily consume individual primarily for a personal,		are defined in 11 U.S.C. § 101(8) as	incurred by an
				☐ No. Go to line 16b.			
				Yes. Go to line 17.			
			16b.	Are your debts primarily busines money for a business or investme			
				☐ No. Go to line 16c.			
				☐ Yes. Go to line 17.			
			16c.	State the type of debts you owe th	at are not consumer debts or b	ousiness debts	
17.		ou filing under oter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.		
Do you estimate that after any exempt property is excluded and Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Yes.		rative					
	administrative expenses are paid that funds will		No				
	be a	vailable for ibution to unsecured itors?		Yes			
18.		How many Creditors do	<b>1</b> -49		□ 1,000-5,000	<b>2</b> 5,001-50,000	
	you owe	estimate that you ?	□ 50-99		☐ 5001-10,000	☐ 50,001-100,000	
			☐ 100-19 ☐ 200-99		☐ 10,001-25,000	☐ More than100,000	
19.		How much do you	<b>\$0 - \$</b>	50 000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 bi	llion
		nate your assets to orth?	□ \$50,001 - \$100,000		□ \$10,000,001 - \$50 million		
				001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 millio		
20.		much do you	□ \$0 - \$ <u>\$</u>	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 bi	llion
	estin	nate your liabilities e?	\$50,0	01 - \$100,000	□ \$10,000,001 - \$50 million	_ ' ' ' ' '	
				001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 millio	_ ' ' ' ' '	
			<b>山</b> \$500,0	JUL - \$1 million	<b>—</b> \$100,000,001 \$000 Hillio	on a wore than too billion	
Part	t 7:	Sign Below					
For	you		I have ex	amined this petition, and I declare u	under penalty of perjury that the	e information provided is true and co	orrect.
						eligible, under Chapter 7, 11,12, or 1 and I choose to proceed under Chap	
				ney represents me and I did not pa t, I have obtained and read the noti		no is not an attorney to help me fill on 2(b).	ut this
			I request	relief in accordance with the chapte	er of title 11, United States Cod	de, specified in this petition.	
				cy case can result in fines up to \$25		noney or property by fraud in connect to 20 years, or both. 18 U.S.C. §§ 1	
			/s/ Ted I	Michalopoulos		M. Michalopoulos	
				halopoulos of Debtor 1	<b>Ashlee M. I</b> Signature of I	<b>Michalopoulos</b> Debtor 2	
			Executed	on April 20, 2018 MM / DD / YYYY	Executed on	April 20, 2018 MM / DD / YYYY	

Debtor 1 Debtor 2	Ted Michalopoulos Ashlee M. Michalo		Docun	nent f	Page 7 of 54	se number (if known)
For your a represent	nttorney, if you are ed by one	under Chap	ter 7, 11, 12, or 13 of title	e 11, United	States Code, and have	e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. §
•	not represented by ey, you do not need page.		in a case in which § 707 dules filed with the petition			no knowledge after an inquiry that the information
			s W. Toolis f Attorney for Debtor		Date	April 20, 2018 MM / DD / YYYY
		Thomas V	V. Toolis 6270743			
		Frankfort Firm name	Law Group			
		Frankfort,	st Lincoln Highway IL 60423 City, State & ZIP Code			
		Contact phone	708-349-9333		Email address	twt@jtlawllc.com

6270743 IL Bar number & State

		DOGUIII	eni Faue o Ul 54	
Fill in this infor	mation to identify your	case:		
Debtor 1	Ted Michalopoulo	os		
	First Name	Middle Name	Last Name	
Debtor 2	Ashlee M. Michale	opoulos		
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				

☐ Check if this is an amended filing

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	18,495.45
	1c. Copy line 63, Total of all property on Schedule A/B	\$	18,495.45
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	15,860.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	40,872.00
	Your total liabilities	\$	56,732.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,789.07
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,835.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a personal	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Debtor 1 Ted Michalopoulos
Debtor 2 Ashlee M. Michalopoulos

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Case numb

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,069.55

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	ıl claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in this in		Document F	Page 10 of 54		
	formation to identify your case	and this filing:			
Debtor 1	Ted Michalopoulos				
	First Name		ast Name		
ebtor 2 Spouse, if filing)	Ashlee M. Michalopou		_ast Name		
	Bankruptcy Court for the: NOF	OTHERN DISTRICT OF ILLING	Ne		
Tilled States	B Barikruptcy Court for the. NOr	THERN DISTRICT OF ILLING	л <b>о</b>		
ase numbe	r			I	Check if this is a amended filing
official !	Form 106A/B				
	ule A/B: Propert	·V			12/15
each categor fits best. Be ore space is i	y, separately list and describe items as complete and accurate as possib needed, attach a separate sheet to the	s. List an asset only once. If an as le. If two married people are filing his form. On the top of any addition	g together, both are equally onal pages, write your name	responsible for supplying c	orrect information. If
art 1: Desci	ribe Each Residence, Building, Land	, or Other Real Estate You Own o	or Have an Interest In		
Do you own	or have any legal or equitable intere	est in any residence, building, lan	d, or similar property?		
<b>=</b> 11 0 .	D 40				
No. Go to					
☐ Yes. Whe	ere is the property?				
art 2: Descr	ibe Your Vehicles				
□ No ■ Yes					
3.1 Make:	Buick	Who has an interest in the p	roperty? Check one	Do not deduct secured claim	
3.1 Make: Model:	Buick LeSabre	Who has an interest in the p ☐ Debtor 1 only	roperty? Check one	Do not deduct secured clain the amount of any secured Creditors Who Have Claim.	claims on Schedule D:
			roperty? Check one	the amount of any secured Creditors Who Have Claims	claims on Schedule D: s Secured by Property.
Model: Year:	LeSabre	Debtor 1 only		the amount of any secured	claims on Schedule D:
Model: Year: Approxi	LeSabre 2003 imate mileage: 170,000 information:	☐ Debtor 1 only ☐ Debtor 2 only	,	the amount of any secured Creditors Who Have Claim.  Current value of the	claims on Schedule D: s Secured by Property.
Model: Year: Approxi	LeSabre 2003 imate mileage: 170,000	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	/ and another	the amount of any secured Creditors Who Have Claim.  Current value of the	claims on Schedule D: s Secured by Property.
Model: Year: Approxi Other ir	LeSabre 2003 imate mileage: 170,000 information:	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors ☐ Check if this is communi	and another	the amount of any secured Creditors Who Have Claim.  Current value of the entire property?	claims on Schedule D: s Secured by Property.  Current value of the portion you own?  \$1,100.00  ms or exemptions. Put claims on Schedule D:
Model: Year: Approxi Other in //Kelle	LeSabre 2003 simate mileage: 170,000 nformation:  y Blue Book  Dodge Caravan 2014	Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi (see instructions)  Who has an interest in the p Debtor 1 only Debtor 2 only	and another  ity property  roperty? Check one	the amount of any secured Creditors Who Have Claim.  Current value of the entire property?  \$1,100.00  Do not deduct secured claim the amount of any secured	claims on Schedule D: s Secured by Property.  Current value of the portion you own?  \$1,100.00  ms or exemptions. Put claims on Schedule D:
Model: Year: Approxi Other ir /Kelle  3.2 Make: Model: Year: Approxi	LeSabre 2003 imate mileage: 170,000 information: y Blue Book  Dodge Caravan 2014 imate mileage: 50,000	Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors Check if this is communi (see instructions)  Who has an interest in the p Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	and another  ity property  roperty? Check one	the amount of any secured Creditors Who Have Claim.  Current value of the entire property?  \$1,100.00  Do not deduct secured claim the amount of any secured Creditors Who Have Claim.	claims on Schedule D: s Secured by Property.  Current value of the portion you own?  \$1,100.00  ms or exemptions. Put claims on Schedule D: s Secured by Property.
Model: Year: Approxi Other ir /Kelle  3.2 Make: Model: Year: Approxi	LeSabre 2003 imate mileage: 170,000 information:  y Blue Book  Dodge Caravan 2014 imate mileage: 50,000 information:	Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi (see instructions)  Who has an interest in the p Debtor 1 only Debtor 2 only	and another  ity property  roperty? Check one	the amount of any secured Creditors Who Have Claim.  Current value of the entire property?  \$1,100.00  Do not deduct secured claim the amount of any secured Creditors Who Have Claim.  Current value of the	claims on Schedule D: s Secured by Property.  Current value of the portion you own?  \$1,100.00  ms or exemptions. Put claims on Schedule D: s Secured by Property.  Current value of the
Model: Year: Approxi Other in /Kelle  3.2 Make: Model: Year: Approxi	LeSabre 2003 imate mileage: 170,000 information: y Blue Book  Dodge Caravan 2014 imate mileage: 50,000	Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors Check if this is communi (see instructions)  Who has an interest in the p Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	and another  ity property  roperty? Check one	the amount of any secured Creditors Who Have Claim.  Current value of the entire property?  \$1,100.00  Do not deduct secured claim the amount of any secured Creditors Who Have Claim.  Current value of the	claims on Schedus Secured by Properties of Sec

☐ Yes

Entered 04/20/18 16:42:22 Case 18-11676 Doc 1 Filed 04/20/18 Desc Main Document Page 11 of 54 **Ted Michalopoulos** Debtor 1 Debtor 2 Ashlee M. Michalopoulos Case number (if known) 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$13,472.00 pages you have attached for Part 2. Write that number here.......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Miscellaneous Household \$700.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$200.00 Miscellaneous Electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... **Everyday Apparel** \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No Yes. Describe..... **Wedding Rings** \$260.00

#### 13. Non-farm animals

Examples: Dogs, cats, birds, horses

■ No

☐ Yes. Describe.....

Debto	Case 18-1167		Filed 04/20/18 Document	Entered 04/20/18 16:42:22 Page 12 of 54	Desc Main
Debto	-			Case number (if know	n)
		_	ou did not already list,	including any health aids you did not list	
	Add the dollar value of all or Part 3. Write that numb			any entries for pages you have attached	\$1,660.00
	Describe Your Financial Ass				
Do yo	u own or have any legal o	r equitable inte	rest in any of the follov	wing?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	xamples: Money you have in			posit box, and on hand when you file your pe	etition
				Cash	\$11.00
	institutions. If you No Yes	s, or other financi have multiple ac 1. <b>Checking</b>	al accounts; certificates counts with the same in Institution	name:	ge houses, and other similar
	17.	2. Checking	Commun	nity Banking - 1940	\$700.00
E. □ \ □ \	Yeson-publicly traded stock a	tment accounts v	with brokerage firms, mo	oney market accounts corporated businesses, including an inte	rest in an LLC, partnership,
ar ■ I	<b>nd joint venture</b> No				
ο,	Yes. Give specific informati	ion about them Name of entity:		% of ownership:	
N N	on-negotiable instruments a No Yes. Give specific information	le personal checture those you can on about them	ks, cashiers' checks, pro	negotiable instruments omissory notes, and money orders. e by signing or delivering them.	
	'	ssuer name:			
	etirement or pension acco xamples: Interests in IRA, E	<b>unts</b> :RISA, Keogh, 40	01(k), 403(b), thrift savin	gs accounts, or other pension or profit-shari	ng plans

Official Form 106A/B Schedule A/B: Property page 3

**Hydrite Chemical** 

401(k)

\$1,400.00

Debtor 1			Case 18-110		Document	Page 13 of !	1/20/18 10.42.22 54	Desc Main
Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others				ılos				n)
Rent Ross Anderson   \$1,250.00    23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)  No   Yes		Your sl Examp □ No	hare of all unused de oles: Agreements with	posits you have made	nt, public utilities (ele	ctric, gas, water), te		panies, or others
23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)  No Yes		. 00.		Rent	Ross And	derson		\$1.250.00
No								
24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. § \$30(b)(1), 529A(b), and 529(b)(1).  No   Yes	23.	_				r life or for a numbe	er of years)	
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).  No  Yes				•				
Yes	24.	26 U.S.0	s in an education If C. §§ 530(b)(1), 529A	<b>RA, in an account in a</b> A(b), and 529(b)(1).	qualified ABLE pro	ogram, or under a	qualified state tuition	program.
No			Institu	tion name and descripti	ion. Separately file t	he records of any ir	nterests.11 U.S.C. § 521	(c):
26. Patents, copyrights, trademarks, trade secrets, and other intellectual property  Examples: Internet domain names, websites, proceeds from royalties and licensing agreements  No  Yes. Give specific information about them  27. Licenses, franchises, and other general intangibles  Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses  No  Yes. Give specific information about them  Money or property owed to you?  Current value of the portion you own?  Do not deduct secured claims or exemptions.  28. Tax refunds owed to you  No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  29. Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement  No  Yes. Give specific information  30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else  No  Yes. Give specific information  31. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  No  Yes. Name the insurance company of each policy and list its value.		■ No	-		(other than anythir	ng listed in line 1),	and rights or powers	exercisable for your benefit
Examples: Internet domain names, websites, proceeds from royalties and licensing agreements  No Yes. Give specific information about them  7. Licenses, franchises, and other general intangibles  Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses  No Yes. Give specific information about them  Money or property owed to you?  Current value of the portion you own? Do not deduct secured claims or exemptions.  28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years  29. Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information  30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information  31. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value.		⊔ Yes.	Give specific inform	ation about them				
27. Licenses, franchises, and other general intangibles  Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses  No Yes. Give specific information about them  Money or property owed to you?  Current value of the portion you own? Do not deduct secured claims or exemptions.  28. Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years  29. Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information  30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information  31. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value.	26.	_Examp					ements	
Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses  No Yes. Give specific information about them  Money or property owed to you?  Current value of the portion you own? Do not deduct secured claims or exemptions.  28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years  29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information  30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information  31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value.		☐ Yes.	Give specific informa	ation about them				
Money or property owed to you?  Current value of the portion you own? Do not deduct secured claims or exemptions.  28. Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years  29. Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information  30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information  31. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value.		_Examp				n holdings, liquor li	censes, professional lice	enses
portion you own? Do not deduct secured claims or exemptions.  28. Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years  29. Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement  No Yes. Give specific information  30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else  No Yes. Give specific information  31. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  No Yes. Name the insurance company of each policy and list its value.		☐ Yes.	Give specific information	ation about them				
<ul> <li>No</li> <li>Yes. Give specific information about them, including whether you already filed the returns and the tax years</li> <li>29. Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement</li> <li>No</li> <li>Yes. Give specific information</li> <li>30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else</li> <li>No</li> <li>Yes. Give specific information</li> <li>31. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance</li> <li>No</li> <li>Yes. Name the insurance company of each policy and list its value.</li> </ul>	Mo	oney or <sub> </sub>	property owed to yo	ou?				portion you own? Do not deduct secured
<ul> <li>Yes. Give specific information about them, including whether you already filed the returns and the tax years</li> <li>29. Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement  No  Yes. Give specific information</li> <li>30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else  No  Yes. Give specific information</li> <li>31. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  No  Yes. Name the insurance company of each policy and list its value.</li> </ul>	28.	Tax ref	unds owed to you					
<ul> <li>Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement</li> <li>No</li> <li>Yes. Give specific information</li> <li>30. Other amounts someone owes you         <ul> <li>Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else</li> <li>No</li> <li>Yes. Give specific information</li> </ul> </li> <li>31. Interests in insurance policies         <ul> <li>Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance</li> <li>No</li> <li>Yes. Name the insurance company of each policy and list its value.</li> </ul> </li> </ul>			Give specific informa	ation about them, includ	ling whether you alre	eady filed the return	s and the tax years	
<ul> <li>☐ Yes. Give specific information</li> <li>30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else</li> <li>■ No</li> <li>☐ Yes. Give specific information</li> <li>31. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance</li> <li>■ No</li> <li>☐ Yes. Name the insurance company of each policy and list its value.</li> </ul>	29.	Examp		p sum alimony, spousa	ıl support, child supp	oort, maintenance, c	divorce settlement, prope	erty settlement
<ul> <li>Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else</li> <li>No</li> <li>Yes. Give specific information</li> <li>Interests in insurance policies         <ul> <li>Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance</li> <li>No</li> <li>Yes. Name the insurance company of each policy and list its value.</li> </ul> </li> </ul>			Give specific informa	ation				
<ul> <li>☐ Yes. Give specific information</li> <li>31. Interests in insurance policies</li></ul>	30.	Examp _	oles: Unpaid wages, o	disability insurance payr		nefits, sick pay, vac	ation pay, workers' com	npensation, Social Security
Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  ■ No □ Yes. Name the insurance company of each policy and list its value.			Give specific information	ation				
☐ Yes. Name the insurance company of each policy and list its value.	31.	_Examp			lth savings account (	(HSA); credit, home	eowner's, or renter's insu	urance
Donomoral Political Control Co			Name the insurance		y and list its value.	Benefi	iciarv:	Surrender or refund

value:

Case 18-11676 Doc 1 Filed 04/20/18 Entered 04/20/18 16:42:22 Desc Main Page 14 of 54 Document **Ted Michalopoulos** Debtor 1 Debtor 2 Ashlee M. Michalopoulos Case number (if known) 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$3,363.45 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

\$0.00

Official Form 106A/B Schedule A/B: Property page 5 Case 18-11676 Doc 1 Filed 04/20/18 Entered 04/20/18 16:42:22 Desc Main Document Page 15 of 54

**Ted Michalopoulos** Debtor 1 Debtor 2 Ashlee M. Michalopoulos Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ...... \$0.00 Part 2: Total vehicles, line 5 \$13,472.00 57. Part 3: Total personal and household items, line 15 \$1,660.00 Part 4: Total financial assets, line 36 58. \$3,363.45 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$18,495.45 Copy personal property total \$18,495.45

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$18,495.45

		DOGUME	<u>III Paue 10 01 54</u>		
Fill in this infor	rmation to identify your	case:			
Debtor 1	Ted Michalopoul	os			
	First Name	Middle Name	Last Name		
Debtor 2	Ashlee M. Michal	opoulos			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)				☐ Check if this is	s an
, ,				amended filing	

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Pro	perty You	Claim as	Exemp	ot
---------	----------	---------	-----------	----------	-------	----

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2003 Buick LeSabre 170,000 miles /Kelley Blue Book	\$1,100.00		\$1,100.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Miscellaneous Household	\$700.00		\$700.00	735 ILCS 5/12-1001(b)
Line Holli Schedule A/B. 0.1			100% of fair market value, up to any applicable statutory limit	
Miscellaneous Electronics Line from Schedule A/B: 7.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
LINE HOITI Schedule A/B. 1.1			100% of fair market value, up to any applicable statutory limit	
Everyday Apparel	\$500.00		\$500.00	735 ILCS 5/12-1001(a)
LINE HOITI Schedule A/B. 111.1			100% of fair market value, up to any applicable statutory limit	
Wedding Rings	\$260.00		\$260.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	

Case 18-11676 Doc 1 Filed 04/20/18 Entered 04/20/18 16:42:22 Desc Main Document Page 17 of 54

**Ted Michalopoulos** Debtor 1 Ashlee M. Michalopoulos Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Cash 735 ILCS 5/12-1001(b) \$11.00 \$11.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking: U.S. Bank - 8925 735 ILCS 5/12-1001(b) \$2.45 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Checking: Community Banking -**735 ILCS 5/12-1001(b) \$700.00 \$700.00 1940 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit 401(k): Hydrite Chemical 735 ILCS 5/12-1006 \$1,400.00 \$1,400.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit **Rent: Ross Anderson** 735 ILCS 5/12-901 \$1,250.00 \$1,250.00 Line from Schedule A/B: 22.1 100% of fair market value, up to any applicable statutory limit (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

3.	Are you	claim	ing a	homestead	d exemption	of more	than	\$160,375?

- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
  - No
  - Yes

Case 18-11676	Doc 1 Filed 04/20/18 Document	B Entered Page 18	04/20/18 16:4 of 54	2:22 Desc M	1ain
Fill in this information to identify you					
Debtor 1 Ted Michalopou	ulos Middle Name	Last Name	_		
Debtor 2 Ashlee M. Mich (Spouse if, filing) First Name	alopoulos Middle Name	Last Name	-		
United States Bankruptcy Court for the	: NORTHERN DISTRICT OF IL	LINOIS			
Case number(if known)				_	if this is an ded filing
Official Form 106D Schedule D: Creditors	Who Have Claims	Secured	by Property	,	12/15
Be as complete and accurate as possible. I leeded, copy the Additional Page, fill it out known).					
. Do any creditors have claims secured by	your property?				
☐ No. Check this box and submit	this form to the court with your other	er schedules. Yo	u have nothing else to	o report on this form.	
■ Yes. Fill in all of the information	below.				
Part 1: List All Secured Claims					
2. List all secured claims. If a creditor has r	more than one secured claim, list the cre-	ditor congratoly for	Column A	Column B	Column C
each claim. If more than one creditor has a passible, list the claims in alphabetical orc	particular claim, list the other creditors in		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Ally Financial	Describe the property that secures	the claim:	\$15,860.00	\$12,372.00	\$3,488.00
Creditor's Name	2014 Dodge Caravan 50,000 Lease	0 miles			
Attn: Bankruptcy Po Box 380901 Bloomington, MN 55438	As of the date you file, the claim is: apply.  Contingent	Check all that			
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as car loan)	mortgage or secure	ed		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Vehicle Leas	se		
Opened 09/15 Last Active					

Add the dollar value of your entries in Column A on this page. Write that number here:	\$15,860.00
f this is the last page of your form, add the dollar value totals from all pages. Write that number here:	\$15,860.00

Last 4 digits of account number

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

5456

Date debt was incurred 1/19/18

	0000 10 11070 2	Document	Page 19 of 54	200 IVIQIII
Fill in this	information to identify your			
Debtor 1	Ted Michalopoulo	·c		
DODIOI 1	First Name	Middle Name	Last Name	
Debtor 2	Ashlee M. Michalo	poulos		
(Spouse if, filin	g) First Name	Middle Name	Last Name	
United Stat	es Bankruptcy Court for the:	NORTHERN DISTRICT OF	FILLINOIS	
Casa numb	or.			
Case numb	<u> </u>			Check if this is an
				amended filing
Ott:-:-1 I	Tames 4005/5			
	Form 106E/F			4044
Schedu	le E/F: Creditors W	ho Have Unsecure	ed Claims	12/15
the Continuat number (if kn	tion Page to this page. If you have	e no information to report in a l	, copy the Part you need, fill it out, number the entries in the Part, do not file that Part. On the top of any additional pages	
	creditors have priority unsecured			
_ `	Go to Part 2.	oumougumer you.		
■ No. G	50 to Part 2.			
	ist All of Your NONDDIODIT	V Unecoured Claims		
	List All of Your NONPRIORIT			
	creditors have nonpriority unsecu			
∐ No. Y	ou have nothing to report in this pa	rt. Submit this form to the court w	vith your other schedules.	
Yes.				
claim, lis	t the creditor separately for each cla	aim. For each claim listed, identif	f the creditor who holds each claim. If a creditor has more that y what type of claim it is. Do not list claims already included in Popore than three nonpriority unsecured claims fill out the Continuation.	art 1. If more than one ation Page of Part 2.
				Total claim
	vocate Medical Group	Last 4 digits of	account number	\$28,000.00
400	priority Creditor's Name  101 Vollmer Road	When was the o	debt incurred?	_
	ympia Fields, IL 60461 nber Street City State Zlp Code	As of the date v	ou file, the claim is: Check all that apply	
	o incurred the debt? Check one.	_	ea me, me claim let check an alax apply	
	Debtor 1 only	☐ Contingent		
_	Debtor 2 only	☐ Unliquidated		
_	Debtor 1 and Debtor 2 only	☐ Disputed		
_	-	. <u></u>	RIORITY unsecured claim:	
_	At least one of the debtors and anot	- Student loan	s	
	Check if this claim is for a comm ne claim subject to offset?	Dobligations a	arising out of a separation agreement or divorce that you did not	
_	•	report as priority	ciaims sion or profit-sharing plans, and other similar debts	
			1 01 ,	
	Yes	Other. Specif	<sub>fy</sub> <u>wearcar</u>	

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Debt	or 2 Ashlee M. Michalopoulos		Case number (if know)				
4.2	AmeriCredit/GM Financial	Last 4 digits of account number	0435	\$0.00			
	Nonpriority Creditor's Name Attn: Bankruptcy		Opened 02/12 Last Active				
	Po Box 183853	When was the debt incurred?	10/06/15				
	Arlington, TX 76096  Number Street City State Zlp Code	As of the date you file, the claim i	s. Check all that annly				
	Who incurred the debt? Check one.	_	S. Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	_	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Automobile	9				
4.3	Capital One	Last 4 digits of account number	7000	\$2,100.00			
	Nonpriority Creditor's Name Attn: Bankruptcy		Opened 10/14 Last Active				
	Po Box 30285	When was the debt incurred?	9/22/16				
	Salt Lake City, UT 84130						
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	☐ Debtor 1 only	☐ Unliquidated					
	■ Debtor 2 only	☐ Disputed					
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims					
	■ No	☐ Debts to pension or profit-sharin					
	Yes	Other Specify Credit Card					
4.4	Capital One	Last 4 digits of account number	2258	\$0.00			
	Nonpriority Creditor's Name			Ψ0.00			
	Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 11/15/05 Last Active 11/17/09				
	Salt Lake City, UT 84130						
	Number Street City State Zlp Code	As of the date you file, the claim i					
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured					
	At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims					
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify Credit Card	d				

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Debt	Ashlee M. Michalopoulos		Case number (if know)	
4.5	Chase Card Services	Last 4 digits of account number	8988	\$5,931.00
	Nonpriority Creditor's Name Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 10/15 Last Active 9/02/16	
	Number Street City State Zlp Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	I <b>claim:</b> ration agreement or divorce that you did not	
	■ No □ Yes	Debts to pension or profit-sharin	- •	
	☐ Yes	Other. Specify Credit Card		
4.6	Check Systems, Inc.  Nonpriority Creditor's Name  Attn: Customer Relations 7805 Hudson Road, Ste 100	Last 4 digits of account number  When was the debt incurred?		\$0.00
	Woodbury, MN 55125  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.  ■ Debtor 1 only  □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured ☐ Student loans	I <b>claim:</b> ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Notice Only	/	
4.7	Convergent Outsourcing, Inc Nonpriority Creditor's Name	Last 4 digits of account number	9855	\$700.00
	Po Box 9004 Renton, WA 98057 Number Street City State Zlp Code	When was the debt incurred?  As of the date you file, the claim i	Opened 01/17 s: Check all that apply	
	Who incurred the debt? Check one.  ■ Debtor 1 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured		
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa		
	Is the claim subject to offset?  ■ No	report as priority claims  Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney Comcast	

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Debtor 1 Ted Michalopoulos

Debto	Ashlee M. Michalopoulos		Case number (if know)	
4.8	Credit One Bank	Last 4 digits of account number	3931	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 98873	When was the debt incurred?	Opened 08/15 Last Active 10/06/16	
	Las Vegas, NV 89193  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.  ☐ Debtor 1 only	Contingent		
	■ Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	I	
4.9	Dyer Family Dental	Last 4 digits of account number		\$350.00
	Nonpriority Creditor's Name 890 Richard Rd Suite B Dyer, IN 46311	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	■ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Dental		
4.10	Equifax Information Services, LLC	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name P.O. Box 740256	When was the debt incurred?		
	Atlanta, GA 30374-0256  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	•		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	I claim:	
	☐ At least one of the debtors and another	Student loans	· Sianni	
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Notice Only	_	

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Debtor	2 Ashlee M. Michalopoulos		Case number (if know)				
4.11	Experian	Last 4 digits of account number		\$0.00			
	Nonpriority Creditor's Name P.O. Box 9701	When was the debt incurred?		<del></del>			
	Allen, TX 75013-9701  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	■ Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:				
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	□ Yes	■ Other Specify Notice Only					
4.12	Hghts Aut Cu	Last 4 digits of account number	0001	\$0.00			
	Nonpriority Creditor's Name		One and 4/02/42 Least Active				
	21540 Cottage Grov Chicago Heights, IL 60411	When was the debt incurred?	Opened 4/02/12 Last Active 2/19/15				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	■ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured					
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharin					
	Yes	■ Other. Specify Unsecured					
4.13	Indiana Department of Revenue	Last 4 digits of account number	2102	\$129.00			
	Nonpriority Creditor's Name  Bankruptcy Section	When was the debt incurred?	5/31/2017				
	100 N. Senate Ave. N240 Indianapolis, IN 46204	mish has the dost medical.	3/3/1/2017				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	•	Type of NONPRIORITY unsecured claim:				
	lacksquare At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims					
	No	☐ Debts to pension or profit-sharin					
	☐Yes	■ Other. Specify Tax Lien					
		Carlott Opcomy					

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Debtor	2 Ashlee M. Michalopoulos		Case number (if know)					
4.14	LVNV Funding/Resurgent Capital	Last 4 digits of account number	2531	\$1,059.00				
	Nonpriority Creditor's Name Po Box 10497 Greenville, SC 29603	When was the debt incurred?	Opened 06/17					
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply					
	Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	l claim:					
	☐ At least one of the debtors and another	Student loans	i oranii.					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	□Yes		Company Account Capital One					
4.15	LVNV Funding/Resurgent Capital	Last 4 digits of account number	3931	\$924.00				
	Nonpriority Creditor's Name Po Box 10497 Greenville, SC 29603	When was the debt incurred?	Opened 06/17					
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent						
	☐ Debtor 1 only	☐ Unliquidated						
	Debtor 2 only	☐ Disputed						
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	$\square$ At least one of the debtors and another							
	☐ Check if this claim is for a community debt Is the claim subject to offset?							
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts						
	☐Yes	■ Other. Specify Factoring (Bank N.A.	Company Account Credit One					
4.16	M Leonard & Associates	Last 4 digits of account number	8492	\$340.00				
	Nonpriority Creditor's Name Po Box 2339	When was the debt incurred?	Opened 8/14/17					
	Van Nuys, CA 91411 Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent						
	Debtor 1 only	☐ Unliquidated						
	Debtor 2 only	☐ Disputed						
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:						
	☐ At least one of the debtors and another	☐ Student loans						
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	■ Other. Specify 01 Vca Forest South Animal Hospit						

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	Ted Michalopoulos  Ashlee M. Michalopoulos		Case number (if know)				
	Miramed Revenue Group	Last 4 digits of account number	1873	\$615.00			
	Nonpriority Creditor's Name Attn: Bankruptcy 360 East 22nd Street Lombard, IL 60148	When was the debt incurred?	Opened 12/16/16				
_	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	☐ Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:				
	☐ At least one of the debtors and another	☐ Student loans	· ordini				
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Franciscan	Specialty Phys Of				
	Miramed Revenue Group Nonpriority Creditor's Name	Last 4 digits of account number	5845	\$64.00			
	Attn: Bankruptcy 360 East 22nd Street	When was the debt incurred?	Opened 3/20/17				
	Lombard, IL 60148  Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply				
	Who incurred the debt? Check one.	_	,				
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured	i claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Franciscan	Specialty Phys Of				
	State Farm Insurance Nonpriority Creditor's Name	Last 4 digits of account number	3414	\$660.00			
	One State Farm Plaza Bloomington, IL 61710	When was the debt incurred?	09/21/2011				
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:				
	At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Judgment					

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Debtor 2	Ashlee M	. Michalopoulos		Case r	number (i	f know)			
		Bank/Care Credit	Last 4 digits of account number	9421			\$0.00		
<i>F</i>	Nonpriority Cred Attn: Bank Po Box 965 Orlando, FL	ruptcy Dept 061	When was the debt incurred?	Opei 6/01/		4/10 Last Active			
		City State Zlp Code	As of the date you file, the claim	is: Check	all that ap	pply			
V	Vho incurred t	he debt? Check one.	☐ Contingent						
	Debtor 1 onl	у	☐ Unliquidated						
	Debtor 2 onl	у							
	Debtor 1 and	d Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:					
	At least one	of the debtors and another	Student loans	u ciaiii.					
	☐ Check if thi	s claim is for a community debt	☐ Obligations arising out of a sepa	aration an	reement o	r divorce that you did not			
		bject to offset?	report as priority claims	aration ag	reement o	r divorce that you did not			
	No		Debts to pension or profit-sharing	ng plans, a	and other	similar debts			
[	Yes		Other. Specify Charge Ac	count					
4.21 <b>1</b>	<b>FransUnion</b>	Consumer Solutions	Last 4 digits of account number				\$0.00		
F	lonpriority Cred	000	When was the debt incurred?						
N	lumber Street (	A 19022-2002 City State Zlp Code	As of the date you file, the claim	is: Check	all that ap	pply			
	_	he debt? Check one.	☐ Contingent						
	Debtor 1 onl	у	☐ Unliquidated						
	Debtor 2 onl	у	☐ Disputed						
	Debtor 1 and	btor 1 and Debtor 2 only  Type of NONPRIORITY unsecured claim:							
	At least one								
		s claim is for a community debt bject to offset?	Obligations arising out of a separeport as priority claims	aration ag	reement o	r divorce that you did not			
	No		Debts to pension or profit-sharing	ng plans, a	and other	similar debts			
[	Yes		Other. Specify Notice On	ly					
trying to	page only if y collect from y an one credito	you for a debt you owe to someone	t your bankruptcy, for a debt that you else, list the original creditor in Parts 1 or 2, list the additional	ırts 1 or 2	, then list	the collection agency here.	Similarly, if you have		
Name and			which entry in Part 1 or Part 2 did you						
						with Priority Unsecured Claim			
	est 203rd S a Fields, IL			Part 2:	Creditors	with Nonpriority Unsecured C	aims		
			st 4 digits of account number						
		alty Physicians Line	· ·	Part 1:	Creditors	with Priority Unsecured Claim			
	a Fields, IL			Part 2:	Creditors	with Nonpriority Unsecured C	aims		
			st 4 digits of account number						
Part 4:		mounts for Each Type of Unse							
	e amounts of c cured claim.	certain types of unsecured claims.	This information is for statistical re	porting p	ourposes	only. 28 U.S.C. §159. Add th	e amounts for each type		
						Total Claim			
Tetal	6a.	Domestic support obligations		6a.	\$	0.00			
Total claii from Par		Taxes and certain other debts yo	u owe the government	6b.	\$	0.00			
	6c.	Claims for death or personal inju	-	6c.	\$	0.00			
	6d.	Other. Add all other priority unsecu	red claims. Write that amount here.	6d.	\$	0.00			

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Debtor 1 Ted Michalopoulos Debtor 2 Ashlee M. Michalopoulos Case number (if know) Total Priority. Add lines 6a through 6d. 6e. 0.00 **Total Claim** 6f. Student loans 6f. 0.00 Total claims from Part 2 Obligations arising out of a separation agreement or divorce that you 0.00 6g. did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. 0.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6i. 40,872.00 Total Nonpriority. Add lines 6f through 6i. 6j. \$ 40,872.00

			111 1 11111. 20 01 34	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Ted Michalopoul	os		
	First Name	Middle Name	Last Name	
Debtor 2	Ashlee M. Michal	opoulos		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Ally Financial Attn: Bankruptcy Po Box 380901 Bloomington, MN 55438	Vehicle Lease
2.2	Ross Anderson 487 Locust Lane Peotone, IL 60468	Yearly Lease

Fill in this inf	ormation to identify your c	Document ase:	Page 29 of	54	
Debtor 1	Ted Michalopoulos				
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2	Ashlee M. Michalo	ooulos			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS		
Case number (if known)					Check if this is an amended filing
	orm 106H le H: Your Code	btors			12/15
people are filing ill it out, and wour name and	ng together, both are equal	ly responsible for supplyin oxes on the left. Attach the Answer every question.	ng correct informati e Additional Page to	s complete and accurate as po on. If more space is needed, o this page. On the top of any	copy the Additional Page,
1. Do you	nave any codebiors. (ii ye	a are ming a joint case, as n	ot hot chirer opoude	as a societion.	
■ No					
☐ Yes					
	the last 8 years, have you l California, Idaho, Louisiana, N			(Community property states angton, and Wisconsin.)	and territories include
■ No. Go	to line 3. d your spouse, former spous	e, or legal equivalent live wit	h you at the time?		
in line 2 a	ngain as a codebtor only if D), Schedule E/F (Official F	hat person is a guarantor	or cosigner. Make s	if your spouse is filing with youre you have listed the credit 6G). Use Schedule D, Schedu	tor on Schedule D (Officia
	umn 1: Your codebtor e, Number, Street, City, State and ZIP	Code		Column 2: The creditor to Check all schedules that ap	•
3.1				☐ Schedule D, line	
Nam	e			☐ Schedule E/F, line	
				☐ Schedule G, line	
Num	ber Street			-	
City	S. G.ISS.	State	ZIP Code		
3.2				☐ Schedule D, line	
Nam	e			☐ Schedule E/F, line	<del></del>
				☐ Schedule G, line	
Num	ber Street			-	

State

City

ZIP Code

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Fill in this informa	tion to identify your case:	
Debtor 1	Ted Michalopoulos	
Debtor 2 Ashlee M. Michalopoulos (Spouse, if filing)		
United States Bar	nkruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number (If known)		Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Fo	rm 106l	13 income as of the following date:

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	t 1: Describe Employment				
1.	Fill in your employment information.		Debto	r 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Employment status	■ Em	ployed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not	employed	☐ Not employed
	employers.	mployers. Occupation		house	Receptionist
	Include part-time, seasonal, or self-employed work.	Employer's name	Autof	rost Corp.	Hydrite
	Occupation may include student or homemaker, if it applies.	Employer's address		N. Grisffith Blvd. th, IN 46319	2545 Bond Street University Park, IL 60484
		How long employed tl	here?	3 Years	4 Years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

2. \$ 2,600.00 \$ 2,875.60
3. +\$ 97.50 +\$ 932.77

For Debtor 2 or

For Debtor 1

4. \$ 2,697.50 \$ 3,808.37

# Case 18-11676 Doc 1 Filed 04/20/18 Entered 04/20/18 16:42:22 Desc Main Document Page 31 of 54

Copy line 4 here	Deb	tor 1 tor 2	Ted Michalopoulos Ashlee M. Michalopoulos		Ca	ase number (if known)			
5. List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions  5b. Mandatory contributions for retirement plans  5c. Voluntary contributions of retirement plans  5c. Voluntary contributions of retirement plans  5c. Voluntary contributions to feed form line 4.  5c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  5c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  5c. Voluntary contributions should plan to the value (if known) of any non-cash assistance had be value (if known) of any non-cash assistance had be value (if know		Con	vyline 4 hore	4				-filing spouse	
58.   Tax, Medicare, and Social Security deductions   58.   \$ 0.00   \$ 0.00		Cop	y line 4 nere	4.	4	2,697.50	Φ	3,808.37	
5.5. Mandatory contributions for retirement plans 5.6. Voluntary contributions for retirement plans 5.7. Voluntary contributions for retirement plans 5.8. Required repayments of retirement fund loans 5.9. Insurance 5.9. S. 0.00 \$ 0.00 5.9. Union dues 5.9. Union dues 5.9. Union dues 5.9. Voluntary contributions Specify: Life 5.9. S. 0.00 \$ 0.00 5.9. Union dues 5.9. Union dues 5.0. S. 0.00 \$ 0.00 6. Other deductions. Specify: Life 5.0. S. 0.00 \$ 0.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5c+5d+5e+5f+5g+5h. 6. \$ 523.16 \$ 1,193.64 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,174.34 \$ 2,614.73 8. List all other income regularly received: 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8. Interest and dividends 8. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8. Social Security 8. So	5.	List	all payroll deductions:						
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5d. Required repayments of retirement fund loans 5e. Insurance 5e. 9. 0.00 \$ 392.62 5f. Domestic support obligations 5g. Inload dues 5g. S. 0.00 \$ 0.00 5g. Union dues 5g. S. 0.00 \$ 0.00 5h. Other deductions. Specify: Life 5h. \$ 0.00 \$ 0.00 5h. Other deductions. Specify: Life 401(k) Loan 5 0.00 \$ 172.53 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+56+5f+5g+5h. 6 5 523.16 \$ 1,193.64 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,174.34 \$ 2,614.73 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net lincome. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance hat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  8p. Pension or retirement income 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 9. Add all other regular contributions to the expenses that you itsel in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your brousehold, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines		5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
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59. Union dues 59. Other deductions. Specify: Life 50. \$1. \$0.00 \$0.00 50. \$0.00		5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
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<ul> <li>7. Calculate total monthly take-home pay. Subtract line 6 from line 4.</li> <li>7. \$ 2,174.34</li> <li>8. List all other income regularly received:</li> <li>8a. Net income from rental property and from operating a business, profession, or farm.</li></ul>			401(k) Loan	_	\$	0.00	\$	172.53	
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	otor 2	Ashlee M. M	ichalopo	ulos			A supplement show	wing postpetition chapter
(Spo	ouse, if filing)					ĺ	13 expenses as of	the following date:
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	se numbe <b>r</b> nown)							
0	fficial Fo	orm 106J				`		
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			st file Offic	ial Form 106J-2, <i>Expense</i>	s for Separate Hous	ehold of Deb	tor 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D and Debtor		■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Son		4	Yes
					Daughter		7	□ No
					Daugillei			■ Yes □ No
								☐ Yes
								□ No
								☐ Yes
3.	expenses o	penses include of people other to d your depende	han $_{m \Box}$	No Yes				
Est	timate your ex	a date after the l	our bankr	uptcy filing date unless	you are using this f plemental Sc <i>hedul</i>	orm as a su e J, check th	pplement in a Ch	apter 13 case to report of the form and fill in the
the	•	h assistance an		government assistance cluded it on <i>Schedule I:</i>	•		Your exp	enses
4.		or home owners and any rent for th		uses for your residence.	Include first mortgag	ge 4. \$		1,250.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
	•	erty, homeowner's				4b. \$		0.00
				upkeep expenses		4c. \$		75.00
5.		eowner's associat		dominium dues our residence, such as ho	ome equity loans	4d. \$ 5. \$		0.00
◡.								

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ebtor 1 Ted Michalopoulos				
ebtor 2 Ashlee M. Michalop	pulos	Case num	ber (if known)	
Utilities:				
6a. Electricity, heat, natural	gas	6a.	\$	343.00
6b. Water, sewer, garbage of		6b.	\$	0.00
6c. Telephone, cell phone, I	nternet, satellite, and cable services	6c.	\$	339.00
6d. Other. Specify:		6d.	\$	0.00
Food and housekeeping sup	plies	7.	\$	800.00
Childcare and children's edu		8.	\$	671.00
Clothing, laundry, and dry cl	eaning		\$	150.00
. Personal care products and		10.	\$	45.00
Medical and dental expenses	<b>.</b>	11.	\$	150.00
Transportation. Include gas,	naintenance, bus or train fare.			
Do not include car payments.		12.	\$	225.00
Entertainment, clubs, recrea	tion, newspapers, magazines, and books	13.	\$	0.00
Charitable contributions and	religious donations	14.	\$	0.00
Insurance.				
	cted from your pay or included in lines 4 or 20.		_	
15a. Life insurance		15a.	·	0.00
15b. Health insurance		15b.		0.00
15c. Vehicle insurance		15c.		163.00
15d. Other insurance. Specify:		15d.	\$	0.00
Specify: IRS	educted from your pay or included in lines 4 or 20.	16.	\$	100.00
Installment or lease paymen			•	
17a. Car payments for Vehicl		17a.	·	409.00
17b. Car payments for Vehicl	e 2	17b.	· -	0.00
17c. Other. Specify:		17c.		0.00
17d. Other. Specify:		17d.	\$	0.00
deducted from your pay on I	naintenance, and support that you did not report ne 5, <i>Schedule I, Your Incom</i> e (Official Form 106			0.00
	support others who do not live with you.		\$	0.00
Specify:		19.		
	not included in lines 4 or 5 of this form or on So			
20a. Mortgages on other prop	erty	20a.		0.00
20b. Real estate taxes		20b.		0.00
20c. Property, homeowner's,		20c.		0.00
20d. Maintenance, repair, and		20d.	·	0.00
20e. Homeowner's association		20e.	·	0.00
Other: Specify: School Ex	penses	21.	+\$	80.00
Postage, Bank Fees, Etc.			+\$	35.00
Calculate your monthly expe	nses			
22a. Add lines 4 through 21.		_	\$	4,835.00
22b. Copy line 22 (monthly exp	enses for Debtor 2), if any, from Official Form 106J-	-2	\$	
22c. Add line 22a and 22b. Th	e result is your monthly expenses.		\$	4,835.00
Calculate your monthly net i				
	ined monthly income) from Schedule I.	23a.		4,789.07
23b. Copy your monthly expe	nses from line 22c above.	23b.	-\$	4,835.00
23c. Subtract your monthly e The result is your <i>month</i>	spenses from your monthly income.  If y net income.	23c.	\$	-45.93
	r decrease in your expenses within the year after a paying for your car loan within the year or do you expect your tgage?			ease or decrease because of a
☐ Yes.   Explain here				

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Fill in this info	rmation to identify you	r case:		
Debtor 1	Ted Michalopou	los		
	First Name	Middle Name	Last Name	
Debtor 2	Ashlee M. Micha	•		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official For	m 106Dec			
		an Individual	<b>Debtor's Schedul</b>	<b>AS</b>
Declara	HOH ADOUL	an mulviduai	Debior 3 Schedul	<b>es</b> 12/15
obtaining mone		in connection with a bank		false statement, concealing property, or to \$250,000, or imprisonment for up to 20
Sig	ın Below			
Did you pa	ay or agree to pay som	eone who is NOT an attor	ney to help you fill out bankruptcy	forms?
■ No				
☐ Yes.	Name of person			ttach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	alty of perjury, I declar re true and correct.	e that I have read the sum	mary and schedules filed with this	declaration and
X /s/ Ted	d Michalopoulos		X /s/ Ashlee M. Michal	opoulos
	lichalopoulos		Ashlee M. Michalope	•
	re of Debtor 1		Signature of Debtor 2	

Date April 20, 2018

Date April 20, 2018

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Fill in this infor	mation to identify you	r case:			
Debtor 1	Ted Michalopou				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Ashlee M. Micha First Name	Alopoulos  Middle Name	Last Name		
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Case number _					Check if this is an
				a	mended filing
Official Fo	rm 107				
•	-	Affairs for Individ	luals Filing for B	ankruptcy	4/16
Be as complete a information. If n	and accurate as poss	ible. If two married people a , attach a separate sheet to	are filing together, both are	e equally responsible for sup ny additional pages, write yo	oplying correct
Part 1: Give I	Details About Your Ma	arital Status and Where You	Lived Before		
1. What is you	r current marital stati	ıs?			
■ Married					
□ Not ma	rried				
2. During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
□ No					
Yes. Lis	st all of the places you	lived in the last 3 years. Do no	ot include where you live no	W.	
Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Address:		Dates Debtor 2 lived there
106 Flami Beecher,		From-To:	■ Same as Debtor 1		Same as Debtor 1 From-To:
states and territor  No	ries include Arizona, Ca	ılifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto F	nity property state or territor Rico, Texas, Washington and V	
	ake sure you iiii out Sc	hedule H: Your Codebtors (Of	iliciai Foitii 100H).		
Part 2 Expla	in the Sources of You	ır Income			
Fill in the total	al amount of income yo	mployment or from operatin ou received from all jobs and a have income that you receive	all businesses, including par		ndar years?
□ No					
Yes. Fil	I in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	\$0.00
		☐ Operating a business		☐ Operating a business	
Official Form 107		Statement of Financial Affairs for Individuals Filing for Bankruptcy			

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De	btor 2 A	shlee M. M	ichalopou	Case number (if known)					
	Debtor 1			Debtor 1	Debtor 2				
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)	
For last calendar year: (January 1 to December 31, 2017)		■ Wages, commissions, bonuses, tips	\$66,469.0	<b>0</b> ☐ Wages, combonuses, tips	missions,	\$0.00			
				☐ Operating a business		☐ Operating a	business		
For the calendar year before that: (January 1 to December 31, 2016)		■ Wages, commissions, bonuses, tips	\$64,012.0	<b>0</b> ☐ Wages, combonuses, tips	missions,	\$0.00			
				☐ Operating a business		☐ Operating a	business		
	■ No	. Fill in the de	Ū	ome from each source separa	no., so no moudo mou	·			
				Debtor 1		Debtor 2			
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)	
Pa	rt 3: Lis	st Certain Pa	yments You	ı Made Before You Filed for	,				
6.		Per Debtor 1's Neither Deindividual programmer in No. Yes  * Subject	s or Debtor 2 ebtor 1 nor primarily for a 90 days bef Go to line. List below paid that continclude to adjustment or Debtor 2 e 90 days bef Go to line. List below include paid to paid the continuous to adjustment or Debtor 2 e 90 days bef	2's debts primarily consume Debtor 2 has primarily consume a personal, family, or househouse you filed for bankruptcy, do 7.  each creditor to whom you pareditor. Do not include payment a payments to an attorney for the on 4/01/19 and every 3 years or both have primarily consumer you filed for bankruptcy, do not not you filed for bankruptcy, do not not not you filed for bankruptcy, do not not not not not not not not not no	r debts? umer debts. Consumer debts. Consumer debts. id purpose." id you pay any creditor a finite for domestic support of his bankruptcy case. re after that for cases filed finite group any creditor a finite group any creditor a finite group any creditor a finite group and creditor an	total of \$6,425* or moore in one or more payobligations, such as cluded on or after the date of total of \$600 or more?	yments and nild support of adjustments	the total amount you and alimony. Also, do nt.	
	Credito	r's Name and	d Address	Dates of payme	ent Total amount paid		Was this	payment for	

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Case number (if known)

Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Capital One vs. Ashlee M. Breach of **Circuit Court of Cook** □ Pending **Michalopoulos** Contract County □ On appeal 2018M6001793 16501 S. Kedzie Pkwv. □ Concluded **Room 119** Markham, IL 60428 State Of Indiana vs. Ted STATE TAX MARION COUNTY CIRCUIT Pending **Michalopoulos WARRANT** COURT □ On appeal 11362102 200 E Washington St W506 Concluded Indianapolis, IN 46204 State Farm Mutual Automobile Ins. **SMALL CLAIMS DU PAGE LAW** □ Pending vs. Ted Michalopoulos JUDGMENT **MAGISTRATE COURT** □ On appeal 505 N. County Farm Road 11SC3414 Concluded Wheaton, IL 60187 Judgment 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the **Describe the Property** Date property Explain what happened

**Ted Michalopoulos** 

Ashlee M. Michalopoulos

Debtor 2

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De	btor 2 A	shlee M. Michalopoulos		Case	number (	if known)		
11.	accounts No	O days before you filed for bank s or refuse to make a payment b . Fill in the details.		did any creditor, including a bank or fina you owed a debt?	ncial ins	stitution, set off any	amounts from your	
	Credito	r Name and Address	De	scribe the action the creditor took		Date action was taken	Amount	
12.		pointed receiver, a custodian, c		as any of your property in the possession er official?	n of an a	ssignee for the ben	efit of creditors, a	
Pai	rt 5: Lis	st Certain Gifts and Contribution	ns					
13.	■ No □ Yes	. Fill in the details for each gift.		did you give any gifts with a total value or Describe the gifts	f more th	nan \$600 per person  Dates you gave the gifts	n? Value	
	Person	to Whom You Gave the Gift and	t			J		
14.	Within 2  No	_ `						
	more th Charity	contributions to charities that an \$600 's Name s (Number, Street, City, State and ZIP Cod		Describe what you contributed		Dates you contributed	Value	
Pa	rt 6: Lis	st Certain Losses						
15.	disaster,	year before you filed for bankro , or gambling?	uptcy or	since you filed for bankruptcy, did you lo	ose anyt	hing because of the	ft, fire, other	
	□ No ■ Yes	. Fill in the details.						
	Describe the property you lost and how the loss occurred Inclu			be any insurance coverage for the loss the amount that insurance has paid. List g insurance claims on line 33 of Schedule Aty.	VB:	Date of your loss	Value of property lost	
	Vehicle front e	e accident, damage to nd				10/2016	\$3,000.00	
	Within 1 consulte Include a  No Yes Person Address	and about seeking bankruptcy or any attorneys, bankruptcy petition  Fill in the details.  Who Was Paid  S	ıptcy, di preparii	id you or anyone else acting on your behang a bankruptcy petition? s, or credit counseling agencies for services  Description and value of any property transferred			erty to anyone you  Amount of payment	
		r website address Who Made the Payment, if Not	You			made		

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Debtor 1 **Ted Michalopoulos**Debtor 2 **Ashlee M. Michalopoulos** 

Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value transferred	alue of any pro	perty	Date payment or transfer was made	Amount of payment
	Frankfort Law Group 10075 West Lincoln Highway Frankfort, IL 60423 twt@jtlawllc.com	Attorney Fees			Various	\$1,060.00
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you	or to make payments			or transfer any prope	erty to anyone who
	No					
	Yes. Fill in the details.	Description and	value of any are	m a #41 /	Data navment	Amount of
	Person Who Was Paid Address	Description and vertical transferred	alue of any pro	perty	Date payment or transfer was made	Amount of payment
18.	<ul> <li>Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyotransferred in the ordinary course of your business or financial affairs?</li> <li>Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgag include gifts and transfers that you have already listed on this statement.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>		•			
	Person Who Received Transfer	Description and v	/alue of	Describe a	any property or	Date transfer was
	Address	property transfer			received or debts	made
	Person's relationship to you					
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote No Yes. Fill in the details.		ny property to a	self-settled tru	ıst or similar device	of which you are a
	Name of trust	Description and v	alue of the prop	perty transferro	ed	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposi	t Boxes, and St	orage Units		
20.	Within 1 year before you filed for bankruptcy,	were any financial ac	counts or instr	uments held in	your name, or for y	our benefit, closed,
	sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No		,		nares in banks, cred	it unions, brokerage
	Yes. Fill in the details.					
		Last 4 digits of account number	Type of accou instrument	clo mo	te account was sed, sold, ved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	r bankruptcy, ar	ny safe deposit	t box or other depos	sitory for securities,
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?

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Debtor 1 **Ted Michalopoulos**Debtor 2 **Ashlee M. Michalopoulos** 

Case number (if known)

22.	Have you stored property in a storage unit or pla	ace other than your home within	1 yea	ar before you filed for bankruptcy	?		
	No						
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Des	scribe the contents	Do you still have it?		
Par	Identify Property You Hold or Control for S	Someone Else					
23.	Do you hold or control any property that someo for someone.	ne else owns? Include any prope	erty yo	ou borrowed from, are storing for	r, or hold in trust		
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value		
Par	110: Give Details About Environmental Information	ation					
For	the purpose of Part 10, the following definitions	apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances and leasting facility or presents.	r, land, soil, surface water, grou ostances, wastes, or material.	ndwa	ter, or other medium, including s	tatutes or		
_	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	sites.					
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		is wa	ste, nazardous substance, toxic	substance,		
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	en th€	ey occurred.			
24.	Has any governmental unit notified you that you	may be liable or potentially liab	le und	der or in violation of an environm	ental law?		
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any	release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or adminis	trative proceeding under any en	vironi	mental law? Include settlements	and orders.		
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case		
Par	11: Give Details About Your Business or Con	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy, o	lid you own a business or have a	ıny of	f the following connections to an	y business?		
	☐ A sole proprietor or self-employed in a to			•			
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						

Entered 04/20/18 16:42:22 Desc Main Case 18-11676 Doc 1 Filed 04/20/18 Page 41 of 54 Document **Ted Michalopoulos** Debtor 2 Ashlee M. Michalopoulos Case number (if known) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Ted Michalopoulos /s/ Ashlee M. Michalopoulos **Ted Michalopoulos** Ashlee M. Michalopoulos Signature of Debtor 1 Signature of Debtor 2 Date April 20, 2018 Date April 20, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your	case:		
Debtor 1	Ted Michalopoulo	S		
Dobtor !	First Name	Middle Name	Last Name	
Debtor 2	Ashlee M. Michalo	poulos		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
Official For <b>Statemen</b>		n for Indiv	iduals Filing Under Chapt	<b>er 7</b> 12/15
creditors have you have lease You must file this	er is earlier, unless th	ur property, or nd the lease has no ithin 30 days after y		
•	ople are filing together I date the form.	in a joint case, bot	th are equally responsible for supplying correct	information. Both debtors must
	nd accurate as possib ur name and case nun		needed, attach a separate sheet to this form. O	n the top of any additional pages,
Part 1: List You	ur Creditors Who Have	Secured Claims		
For any credito information bel		rt 1 of Schedule D:	Creditors Who Have Claims Secured by Proper	rty (Official Form 106D), fill in the
	ditor and the property the	nat is collateral	What do you intend to do with the property the secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's <b>Al</b> l	ly Financial		☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
property	2014 Dodge Carava miles Lease	an 50,000	<ul> <li>Retain the property and enter into a Reaffirmation Agreement.</li> <li>Retain the property and [explain]:</li> </ul>	☐ Yes
securing debt:				_
For any unexpired in the information	below. Do not list rea	se that you listed i	n Schedule G: Executory Contracts and Unexpi expired leases are leases that are still in effect; he trustee does not assume it. 11 U.S.C. § 365(p	the lease period has not yet ended.
Describe your un	expired personal prop	erty leases		Will the lease be assumed?
, , , , , , , , , , , , , , , , , , , ,				
Lessor's name:				□ No
Description of leas	sed			
Property:				☐ Yes
Lessor's name: Description of leas	sed			□ No
Property:				☐ Yes
Lessor's name:				

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

page 1

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		ed Michalopoulos shlee M. Michalopoulos			Case number (if known)	
	cription o	of leased				□ No □ Yes
Des	sor's nam cription c perty:					□ No □ Yes
Des	sor's nam cription co perty:	· <del>* ·</del>				□ No □ Yes
Des	sor's nam cription c perty:					□ No □ Yes
Des	sor's nam cription o perty:					□ No □ Yes
	er penalt	gn Below y of perjury, I declare that I have i is subject to an unexpired lease.		ut an	y property of my estate that se	cures a debt and any personal
X	Ted Mi	Michalopoulos ichalopoulos re of Debtor 1	X	Asl	Ashlee M. Michalopoulos hlee M. Michalopoulos hature of Debtor 2	
	Date	April 20, 2018	Da	ate	April 20, 2018	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-11676 Doc 1 Filed 04/20/18 Entered 04/20/18 16:42:22 Desc Main Document Page 48 of 54

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court Northern District of Illinois**

In re	Ted Michalopoulos Ashlee M. Michalopoulos		Case No.				
	·	Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPEN	SATION OF ATTOR	RNEY FOR DE	BTOR(S)			
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(lompensation paid to me within one year before the filing erendered on behalf of the debtor(s) in contemplation of	b), I certify that I am the attorn of the petition in bankruptcy,	ney for the above nan or agreed to be paid	ned debtor(s) and that to me, for services rendered	d or to		
	For legal services, I have agreed to accept		\$	1,588.00			
	Prior to the filing of this statement I have received			1,060.00			
	Balance Due		\$	528.00			
2. T	he source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3. T	he source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4. <b>I</b>	I have not agreed to share the above-disclosed competer	nsation with any other person	unless they are memb	pers and associates of my la	ıw firm.		
[	I have agreed to share the above-disclosed compensat copy of the agreement, together with a list of the name				n. A		
5. I	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
b c	Analysis of the debtor's financial situation, and rendering Preparation and filing of any petition, schedules, statest Representation of the debtor at the meeting of creditor [Other provisions as needed]	nent of affairs and plan which	may be required;		7;		
6. B	y agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any adverget or extude debts from discharge.			ermine dischargeability	of a		
		CERTIFICATION					
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	payment to me for re	presentation of the debtor(s	s) in		
	oril 20, 2018	/s/ Thomas W. To					
Do	te	Thomas W. Toolis Signature of Attorne Frankfort Law Gro 10075 West Linco Frankfort, IL 6042 708-349-9333 Fa twt@jtlawllc.com Name of law firm	y oup oln Highway :3 x: 708-349-8333				

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### Frankfort Law Group, LLC

ATTORNEYS AT LAW

Thomas W. Toolis, Esq. Email: twt@jtlawllc.com

Patrick S. Sullivan, Esq. Email: pss@jtlawllc.com

10075 W. Lincoln Highway Frankfort, IL 60423 Telephone: (708) 349-9333 Facsimile: (708) 349-8333 Christopher M. Jahnke, Esq.\* Email: <a href="mailto:com/cmj@jtlawllc.com">cmj@jtlawllc.com</a>

\*Also admitted in Florida

Website: www.jtlawllc.com

#### RETAINER AGREEMENT – SET FEE CHAPTER 7 BANKRUPTCY

The client hereby agrees to retain and employ Frankfort Law Group as his/her attorneys to represent him/her in connection with the filing of a Chapter 7 Bankruptcy

The client agrees to pay Frankfort Law Group the following fees for services in this matter:

- 1. <u>Compensation:</u> The set fee is as follows:
  - a. The client agrees to pay Frankfort Law Group for services under this Agreement in the flat fee of \$1,600.00 as Attorney's Fees, that are broken down as follows: \$1036.00 for pre-filing services and \$366.00 for post-filing services; and
  - b. The client agrees to pay in addition to attorney's fees, the filing fee in the amount of \$335.00, the credit report fees of (33.00 or 66.00), and \$35.00 administrative document fee.
  - 1<sup>st</sup> Installment \$656.00 < 530
  - 2<sup>nd</sup> Installment \$656.00 530 due on: signing
  - 3rd Installment \$656.00 5-8 due on: 1 week prior to 341 meeting
- 2. <u>Scope of Services:</u> The Client hereby retains and employs Frankfort Law Group to represent the Client in all matters customarily associated with a Chapter 7 Bankruptcy, including but not limited to advice regarding preparation and filing of all necessary petitions and schedules, appearance at creditors' meeting and negotiation and preparation of reaffirmation agreements.
- 3. The client agrees that if any creditor files any adversary proceeding, including but not limited to a motion to modify the automatic stay to collect a debt; objects to the discharge ability of any debt or attempts to prevent the client from obtaining a discharge, the client will be billed \$300.00 per hour for attorneys' court and non-court time / \$250.00 per hour for non-attorney staff/paralegal time if unanticipated services are required. Any action to enforce the automatic stay, Fair Debt Collection Act or similar action will be billed \$350.00 per hour for attorney's court and non-court time.
- 4. Client further agrees and understands that he/she shall keep their attorney advised of their whereabouts, current telephone number and other such information at all times, and to cooperate with their attorney in these proceedings.
- 5. Client further agrees and understands that their attorney retains the right to withdraw if client is in violation of any part of this agreement.
- 6. Client further agrees and understands that if they are in violation of this agreement, or if their attorney ceases to represent them, no part of the retainer or other fees shall be refunded. Only unused costs advanced, if any, shall be refunded to the client.

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- 7. Client further agrees and understands that no promise of any kind regarding the outcome of this bankruptcy proceeding has been made to them and that they expect and understand that their attorney may approach this matter however in his judgment he deems best.
- 8. An administrative fee of \$100.00 will be charged per schedule for any amendment to any pleadings. Accordingly, it is of utmost importance that you review your pleadings before signing them to verify that there are no errors, that all dollar amounts are correct and that all your creditors are listed.
- 9. Client further agrees to pay an additional fee of \$300.00 for each reaffirmation agreement accepted by the debtor and entered in the bankruptcy proceeding. However, the new law will only allow a reaffirmation to be approved if you show that you can afford the payment. If you remain current on the debt without reaffirming, I do not think the creditor will repossess the property, however, I cannot guarantee your retention of the property. It is my advice that you should not reaffirm on any property. Especially if you owe more that it is worth. If you still wish to reaffirm against my advice, please contact the creditor to get a reaffirmation agreement and send my office a letter explaining why you need to reaffirm the debt with a money order payable to Frankfort Law Group. Once we have received the documentation and payment, I will file the reaffirmation agreement and schedule a court hearing. You will need to be present in court to explain to the judge why you want to reaffirm the property.
- 10. Any continued hearing will result in a \$150.00 fee to be paid prior to the continued date.

12.

11. I hereby authorize Frankfort Law Group, or an employee thereof, to order my credit report for the purpose of completing my bankruptcy petition.

I understand that I may forfeit my entire tax return or a portion thereof to the Chapter 7 Trustee.

I understand that I am required to complete a personal financial management class prior to my court appearance. If I fail to provide the Office of Frankfort Law Group with my credit counseling course and my case is closed without discharge, I understand that I will be required to pay a fee of \$600.00 to re-open my case and file the second counseling class certificate.

Ann M

- I have been advised that any credit card charges or other debt I have incurred in the 75 days prior to the filing of my case are not dischargeable.
- 15. If you wish to retain your automobile, a Chapter 7 will not prevent the repossession of your vehicle. You must be current within 30 days of the filing of your case.
- 16. I have listed all retirement accounts owned by me or my spouse. I do not own any inherited retirement accounts and have been advised that they are not exempt from the Chapter 7 Trustee.

The client understands that he/she will be billed monthly for all amounts due for fees and costs advanced on his/her file. These amounts are **due** in full at the time of execution of the documents. Balances not paid by the 15<sup>th</sup> day of the month may be subject to an interest at the rate of 1.5% per month. If it is necessary to enforce this Agreement by collection proceedings, attorney's fees shall be paid at the above hourly rate.

Agreed to by Client:	
arlee Michalspall	Date 3-20-18
Ind Wichelphander	3-20-18
	Date
Agreed to by Frankfort Law Group	Date
his retainer not valid unless countersigned by an authorized attorney of Frankfort Law	Date
ms received not raine amoss countersigned by an additionized attorney of I fanktort baw	Sicup

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#### United States Bankruptcy Court Northern District of Illinois

In re	Ashlee M. Michalopoulos		Case No.	
	7.0.11.00 IIII IIII.0.11.0.10.00	Debtor(s)	Chapter	7
	VERI	FICATION OF CREDITOR M	<b>IATRIX</b>	
		Number of	f Creditors: _	21
	The above-named Debtor(s) he (our) knowledge.	ereby verifies that the list of credi	tors is true and	correct to the best of my
Date:	April 20, 2018	/s/ Ted Michalopoulos Ted Michalopoulos		
		Signature of Debtor		
Date:	April 20, 2018	/s/ Ashlee M. Michalopoulos		
		Ashlee M. Michalopoulos		
		Signature of Debtor		

Advocate Medical Group 4001 Vollmer Road Olympia Fields, IL 60461

Ally Financial Attn: Bankruptcy Po Box 380901 Bloomington, MN 55438

AmeriCredit/GM Financial Attn: Bankruptcy Po Box 183853 Arlington, TX 76096

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Chase Card Services Correspondence Dept Po Box 15298 Wilmington, DE 19850

Check Systems, Inc. Attn: Customer Relations 7805 Hudson Road, Ste 100 Woodbury, MN 55125

Convergent Outsourcing, Inc Po Box 9004 Renton, WA 98057

Credit One Bank Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193

Dyer Family Dental 890 Richard Rd Suite B Dyer, IN 46311

Equifax Information Services, LLC P.O. Box 740256 Atlanta, GA 30374-0256

Experian P.O. Box 9701 Allen, TX 75013-9701

Franciscan Specialty Physicians 3700 West 203rd Street Olympia Fields, IL 60461

Hghts Aut Cu 21540 Cottage Grov Chicago Heights, IL 60411

Indiana Department of Revenue Bankruptcy Section 100 N. Senate Ave. N240 Indianapolis, IN 46204

LVNV Funding/Resurgent Capital Po Box 10497 Greenville, SC 29603

M Leonard & Associates Po Box 2339 Van Nuys, CA 91411

Miramed Revenue Group Attn: Bankruptcy 360 East 22nd Street Lombard, IL 60148

Ross Anderson 487 Locust Lane Peotone, IL 60468

State Farm Insurance One State Farm Plaza Bloomington, IL 61710

Synchrony Bank/Care Credit Attn: Bankruptcy Dept Po Box 965061 Orlando, FL 32896 TransUnion Consumer Solutions P.O. Box 2000 Chester, PA 19022-2002